(b) if so, whether the Central Goverinment propose to investigate the cause of spread of Hepatitis patiants in the Capital; and

(c) if so, the details thereof?

THE MINISTER OP HEALTH AND FAMILY WELFARE i.SHRI B. SHANKARANAND): (a) Yes, Scr.

(b) and (c) Eocal outbreak of Jaundice was reported from certain areas of Delhi only. National Institute of Communicable Diseases. Delhi provides laboratory support to inevestigate hapatitis outbreaks.

Outbreak of Malaria in Rajasthan

83. SHRI KRISHNA KUMAR BIRLA:
MISS SAROJ KHAPARDE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(*) whether Government are aware of ths outbieak of Malaria in Rajasthata:

(b) if so, which of the areas in the State are moat affected by Malaria, according to tile study by the Centre; and

fc) what is the central assistance given to the S'ate Government against the demand, if any, to meet the situation?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) Yes, Sir. Barmer, Bikaner Jaisalmer and Jodhpur Districts were the most affected.

(c> A central technical team was deputed to the State to evaluate the situation and provide technical guidance. Besides, the following materials have been provided to the State by the Centre:

Choloroquine. tabs.—24:5 lakhs
Primagu»ie tabs.—41.31 lakhs
Qucnine injection—3,000 ampules
DDT 50 per cent—424 MT BHC 50
per cent—50 MT Aayush—64
(Ayurvedic drugs) '

Workshop on pre-natal diagnoses and therapy

84. SHRI B. K. HARIPRASAD: Wilj the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of a recent national workshop held in Bangalore on Pre-mtatai diagnosis and therapy organised by ISPAT and of the contents of its deliberations);

(b) whe;ber the consensus of the workshop emerging from deliberation suggested the suitability of Bangalore as a potential bio-tech centre in the whole of South Asia;

(c) whether it is also a fact that despite mansive outlays in health ahd medicare, $Indi_a$ does not have a single laboratory that could serve as a reference cetntre providing complete range of diagnostic facilities required in pre-hatal diagnosis: and

(d) whether Government would insti tute a special category of fellowships under the ICMR Scheme in micro-biology and genetic engineering which will address basic human issues?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND) : (a) to (d). Information is being collected and will be placed on the Table of the House.

Measures to prevent the spread of Fluorosis!

85. SHRI B. K. HARIPRASAD; Will the Mikvister of HEALTH AND FAMILY WELFARE b_e pleased to state:

(a) whether fluorosis is still widely prevalent in India in as many States as 15 'Including Karnataka; and

(b) whether any preventive measures are being taken by ensuring adequate pro vision of potable water to rural populace and to prevent water pollution?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND); (a) Yes, Sir.

(b) The Government has launched a Sub-Mission on Control of Fluorosis under the Rajiv Gandhi National Drink-ihg Water Mission (RGNDWM) with emphasis on supply of safe drinking water and installatioln of defluoridation plants in the endemic areas.

Symposium on Vector-borne diseases

86. SHRI B. K. HARIPRASAD: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) what were the significant aspects of deliberations held during the Bhubanesh-war Symposium on Vector-borne diseases including guinea-worm disease which js still prevalent in Rajasthan, Karnataka and Madhya Pradesh;

(b) what are the flnhuai allocations earmarked for the eradication of guines-wormdisease all over the country and whether akiy grant from World Health Organisation is also received in this re gard;

(c) whether it is a fact that developing countiies like Bahgladesh, Burma, Iraq and Iran held successfully eradicated guinea-worm disease decades ag°> while India j_s still to d_0 so. and

(d) what is the deadline India set to make the nation free of this disease?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) This sysmosium oh| the epidemiological prevention and con-, trol aspects of various vectorborne diseases discussed the achivements of the National Guinea-worm Eradication Programme in India.

(b) The annua] allocatioh by this Mini stry during current Year is of the order of Rs. 50 lakhs. WHO would provide Rs. . 24.06 lakhs.

(c) These countries are not reporting any guinea-worm cases.

(d) India has already achieved more than 99 per cent decline in the incidence of Guinea-worm disease and the country is likely to achieve zero percetat guinea-worm disease transmission during the year 1995-96.

Meastres to prevent rapid growth of population

*87. SHRI RAMDAS AGARWAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a.) whether Government's attention has been drawn to a newsitem published in the "Hindustan Times' dated the 21st November, 1994 captioned "India's population to crosj 100 m. mark" by the end of the current century and that population figure would stand at 101 crores by 2000 A.D. and grow up to 216 crore by 2050 according to the Registrar General of India;

tbj whether it is a fact that the strict family planning methods adopted by country like China were likely to bear fruit and their population was projected to grow onjy upto 140 crore by 2050;

(c) whether Government are aware that the continued population increase in India would worsen social tension and would have an adverse impact on the environ ment, a major threat being faced by developing nations;

(d) if so, what steps Government of India have taken so far in this direction to check further increase in population of the country;

(e) which States implemented family planning procedure in an exemplary manner and which are not strictly following family planning methods in the country; and

(f) whether Government propose to adopt compulsory registration of mar riages also, if so, by when and if not, the reasons therefor?